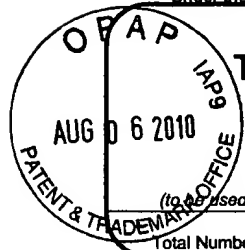


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# TRANSMITTAL FORM

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Total Number of Pages in This Submission

20

Application Number

09/938,265

Filing Date

August 23, 2001

First Named Inventor

Bart C. Thielges

Art Unit

3624

Examiner Name

Loftis, Johnna Ronnee

Attorney Docket Number

Landport 1005

## ENCLOSURES (Check all that apply)

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|---|---|---|
| <input type="checkbox"/> Fee Transmittal Form                             | <input type="checkbox"/> Drawing(s)                                       | <input type="checkbox"/> After Allowance Communication to TC                            |
| <input type="checkbox"/> Fee Attached                                     | <input type="checkbox"/> Licensing-related Papers                         | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences     |
| <input checked="" type="checkbox"/> Amendment/Reply                       | <input type="checkbox"/> Petition   | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final                                      | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Proprietary Information  |
| <input type="checkbox"/> Affidavits/declaration(s)                        | <input type="checkbox"/> Power of Attorney, Revocation                    | <input type="checkbox"/> Status Letter  |
| <input checked="" type="checkbox"/> Extension of Time Request             | <input type="checkbox"/> Change of Correspondence Address                 | <input type="checkbox"/> Other Enclosure(s) (please identify below):                    |
| <input type="checkbox"/> Express Abandonment Request                      | <input type="checkbox"/> Terminal Disclaimer                              |   |
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| <input type="checkbox"/> Certified Copy of Priority Document(s)           | <input type="checkbox"/> CD, Number of CD(s) _____                        |   |
| <input type="checkbox"/> Reply to Missing Parts/Incomplete Application    | <input type="checkbox"/> Landscape Table on CD                            |   |
| <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 |   |   |

### Remarks

Response to Office Action dated March 4th, 2010.

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Mark A. Thomas, P.C.		
Signature	<i>Mark A. Thomas</i>		
Printed name	Mark A. Thomas		
Date	Wednesday, August 4, 2010	Reg. No.	37,953

## CERTIFICATE OF TRANSMISSION/MAILING

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